

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T-G		8/20/01
O.I.P.E. CLASSIFIER			8/20/01
FORMALITY REVIEW	Hayri	760	8-27-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	10/4/01
2	11/1/01
3	11/1/01
4	11/1/01
5	11/1/01
6	11/1/01
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8	11/1/01
9	11/1/01
10	11/1/01
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49	11/1/01
50	11/1/01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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